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Bib Data Sheet

CONFIRMATION NO. 8585

<b>SERIAL NUMBER</b> 10/527,925	<b>FILING OR 371(c) DATE</b> 09/15/2005 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1633	<b>ATTORNEY DOCKET NO.</b> 18749
<b>APPLICANTS</b> Raymond John Steptoe, Victoria, AUSTRALIA; Leonard Charles Harrison, Victoria, AUSTRALIA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/AU03/01212 09/16/2003				
<b>** FOREIGN APPLICATIONS *****</b> AUSTRALIA 2002952834 09/16/2002				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 08/16/2006</b>				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <u>Allowance</u> Examiner's Signature <u>[Signature]</u> Initials <u>[Initials]</u>		<b>STATE OR COUNTRY</b> AUSTRALIA	<b>SHEETS DRAWING</b> 11	<b>TOTAL CLAIMS</b> 25
				<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 272				
<b>TITLE</b> Method of treating an autoimmune disease				
<b>FILING FEE RECEIVED</b> 1280	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	